Health Insurance for Locally Employed Staff Pre-Proposal Conference

Find the solicitation at: beta.SAM.gov

Proposals due on: 13 November 2020 at 17:00 Kinshasa time

Getting Started

Formalities

- Ask or submit questions in chat; however, if the answer requires research, we may not be able to answer during the meeting
- All questions and answers will be publicly posted on beta.SAM.gov site

Introductions

- Alan Royston, COR
- Doug Demaggio, CO
- Daniel Mandell, CO
- Trecia Kitombolwe, Procurement Supervisor
- Annie Ntula, Contracting Specialist

Proposal Submission Instructions

- Direct any questions to the Contracting Officer at KinshasaBid@state.gov
- Submit proposals by email to <u>KinshasaBid@state.gov</u>
- Proposals due by 13 November 2020 at 17:00 Kinshasa time
- Off-the-shelf products are encouraged, but may need to be tailored to the minimum coverage levels and all instructions must still be followed and all sections addressed for a proposal to be technically acceptable
- Please make sure your proposals are COMPLETE

SAM Registration

- Offerors must be registered in the System for Award Management (SAM)
- https://www.sam.gov
- Required before an award can be made
- Guidelines for SAM registration:
 - https://www.fsd.gov/fsd-gov/learning-centersystem.do?sysparm_system=SAM
- These details can be found in the solicitation cover letter

Required Elements for COMPLETE Proposals

- Section A, Form SF-33
- Section B, Pricing Schedule (must be filled in)
- Section B, Retention Amounts in B.3 (must be filled in)
- Section C, Comprehensive presentation of proposed insurance coverage for ALL the listed categories of benefits required in clear, understandable language (spreadsheet recommended)
- Section K, Representations and Certifications (has boxes to be checked and blanks to be filled in)
- Section L, All information required in all four parts of Section L must be provided.

Section A, Form SF-33

- Box 15A Business Name and Address
- Box 15B Phone number
- Box 16 Name and Title of Authorized Signer
- Box 17 Signature
- Box 18 Offer Date

15A. NAME AND ADDRESS OF OFFEROR	CODE FACILITY		16. NAME AND TITLE O	F PERSON AUTHORIZED print)
15B. TELEPHONE NO. (Include area code)	15C. CHECK IF REMITTANCE ADDRESS [] IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS	17. SIC	SNATURE	18. OFFER DATE

Section B, Pricing Schedule

- Exclude VAT the U.S. Embassy has a tax exemption
- Provide Monthly Rates for each category of premium:
 - Employee Only: 1 covered individual
 - Employee Plus One: 2 covered individuals
 - Employee Plus Family: 3 or more covered individuals
- Fill in pricing tables for Base Year and Four Option Years
- Multiply Estimated Number of Premiums by Monthly Rate for Monthly Total, and multiply by 12 for Annual Total

Section B, Pricing Schedule, Base Year

Category	Estimated	Monthly Rate	Monthly Total	Annual Total
	Number of	per Premium		(Monthly Total
	Premiums*			times 12)
a. Employee only				
	48			
b. Employee plus				
one	55			
c. Employee plus				
family	315			
1 0 1 1	410	3/3/	3737	
d. Subtotal	418	XX	XX	

^{*}estimated number of premiums does not include any Riders (B.1.1)

^{**}does not include any premiums for Riders.

Rider Category***	Monthly Premium
C.1.1.21 Excess Coverage	

^{***}not included in the Total Price for Base Year Calculation

Section B, Pricing Schedule, Option Years

Category	Estimated	Monthly Rate	Monthly Total	Annual Total
	Number of	per Premium		(Monthly Total
	Premiums*			times 12)
a. Employee only				
	50			
b. Employee plus				
one	60			
c. Employee plus				
family	320			
d. Subtotal	430	XX	XX	

^{*}estimated number of premiums does not include any Riders (B.1.1)

^{**}does not include any premiums for Riders.

Rider Category***	Monthly Premium
C.1.1.21 Excess Coverage	

^{***}not included in the Total Price for First Option Year Calculation

Riders not included in Pricing Schedule

- Official Residence (ORE) Staff are included at the same rates as a Rider, billed directly to the Chief of Mission and Deputy Chief of Mission
- Excess Coverage (under C.1.1.19 Benefits) is offered to Staff as an optional benefit as a Rider, paid for by individual Staff
- The USG is not responsible, nor liable, for any riders
- See Section G for billing procedures

Section B, Pricing Schedules Grand Total

Provide the Total for Base Year Plus ALL Option Years

B.2.8 Grand Total of Base Plus All Option Years		
(Does not include any premiums for Riders)		
Base Year		
First Option Year		
Second Option Year		
Third Option Year		
Fourth Option Year		
Grand Total of Base Year Plus All Option Years		

Section B, Retention Amounts in B.3

- Retention Amount includes all costs minus actual amount intended to be paid to medical providers or claimants
- Retention Amount includes overhead, administration, profit, etc.
- Provide Retention Amount for each category of Monthly
 Premium for Base Year and ALL Option Years
- The Retention Amount is required for any Economic Price Adjustments for the duration of the contract

Section C, Description/Specification/Work Statement

- Section C.1.1 details the MINIMUM acceptable benefits
- Proposed coverage levels must MEET OR EXCEED these minimum benefit levels
- Off-the-shelf products are encouraged as long as they MEET OR EXCEED the minimum coverage levels in EVERY category
- Off-the-shelf products may need to be tailored in some areas to meet or exceed the minimum acceptable benefits and to address every required category
- Offerors must provide a coverage level for EVERY category listed

Section C, Minimum Coverage Levels

- Where the minimum coverage level is 100%, only 100% coverage is acceptable
- Where the minimum coverage level is 80%, any level of coverage at or above 80% is acceptable
- Where a minimum sub-limit is specified (e.g., hearing aids, optical care, dental care, etc.), proposals must meet or exceed the stated minimum sub-limit for that category
- The Washington DC office responsible for approving benefit levels may allow a sub-limit in a category that does not specify a sublimit, particularly when common practice and the proposed coverage meets or exceeds the minimum coverage level, such as 100% coverage in a category with a minimum of 80%

Section C, Annual Maximum Coverage

- The Annual Maximum Limit is \$47,000
- Proposals must meet or exceed the Annual Maximum Limit

- C.1.3 details the exclusions and limitations for coverage and reimbursements
- C.1.4 defines the eligible participants

Section C, Brochure Requirement

- The winning Contractor must provide a brochure describing the benefits in both French and English within 15 days of award
- The Contractor will be responsible for providing brochures for all employees and upon request

Section E, Inspection and Acceptance

- Solicitation/Contract includes many clauses from the Federal Acquisition Regulations (FAR)
- Some clauses included by reference only, others in full text throughout the contract
- Full FAR clauses can be found at <u>http://www.acquisition.gov/far/</u>

Section E, Inspection and Acceptance

- Quality Assurance and Surveillance Plan (QASP)
 - No more than three customer complaints per month
- The Contracting Officer's Representative (COR) will receive and review complaints for validity, document them and communicate them to the Contractor appropriately
- Please review procedures for receiving and addressing complaints

Section F, Deliveries or Performance

- Covers period of performance and options: base year plus four one-year options to renew
- Reports and deliverables should be sent to the Human Resources Officer (HRO) who is the COR for this contract

Section G, Contract Administration Data

- Outlines the role and duties of the Contracting Officer's Representative (COR)
- The COR maintains the list of the covered employees and dependents
- Payment in USD
- Invoices should be sent to <u>KinshasaInvoice@state.gov</u>
- Invoices may be submitted monthly at the beginning of the month
- Overpayments may be settled as a credit or refund at the discretion of the CO

- Covers Security, Standards of Conduct, Ordering Procedures
- The Embassy will issue task orders identifying all employees and dependents to be covered
- The COR may make subsequent additions or deletions from this list
- Premiums should be pro-rated for changes based on dates of employment
- Riders (for ORE staff) are not included in the task orders—they are reported by the employer or by the COR, but clearly identified as separate from Embassy employees and dependents

- Contractor Responsibility in Claims and Reimbursements
 - Maintain administrative records
 - Provide Claim forms to the COR
 - Settle reimbursement claims within two weeks
- Employees return claim forms to the COR, to be collected by the Contractor
- Online claims submission process welcome, but Contractor must accept paper claims as well
- Payment method of cash or EFT as selected by claimant
- Payment shall be accompanied by details of the amount reimbursed with an explanation of any deductions

- Employees or dependents should have unrestricted choice to go for medical care to any of the clinics and/or hospitals designated for direct payment by the Contractor
- Contractor should have a number of clinics and/or hospitals within their network where employees or dependents may receive medical care directly paid by the Contractor

At least seven (7) of the ten (10) following clinics/hospitals should be included as options for medical care with <u>direct payment</u> by the Contractor:

- Centre Hospital Mongala
- Centre Hospitalier Monkole
- Centre Hospitalier Nganda
- Centre Medical de Kinshasa (CMK)
- Centre Medical Diamant

- HJ Hospitals
- Hopital Biamba Marie Mutombo
- Medecins de Nuit
- Ngalima Center
- PolyClinique de Kinshasa

- Contractor should provide a detailed Employee Claims
 Report to the COR every month
- Contractor should have all necessary permits, licenses, and registrations for the services covered by this contract and pay any necessary fees and taxes due to the host government, at no cost to the U.S. Government

Section I, Contract Clauses

- Numerous FAR clauses included by reference or in full
- Instructions provided in contract to find full text of FAR clauses at http://www.acquisition.gov/far/
- Minimum order from the Embassy guaranteed at 300 premiums
- Maximum order: Contractor is not obligated to fulfill any single item in excess of 450 premiums or combination in excess of 600 premiums

Section J, Exhibits/Attachments

- Employee Demographics/Statistics
 - List of employees, employee's spouses and dependent children by gender and age ranges
 - List of Official Residence Employees (ORE) Rider employees, employee's spouses and dependent children

- Please read carefully: Several parts require information to be provided and boxes checked
- K.1.b.2.i Insert full name and title of person responsible for determining the prices in the proposal
- K.4.d Taxpayer Identification Number only required for U.S. citizens/companies
- K.6.2 System for Award Management (SAM)
 - Contractors must be registered with SAM to receive a contract
 - Contractors may complete certifications in SAM through https://www.sam.gov
- K.7.A,B,C,D and E each have boxes to check:
 - (E) The Offeror has [_] has not [_], within a three-year period preceding this offer, had one or more contracts terminated for default by any Federal agency.
- K.8.b Check appropriate line (1) or (2)

- K.9 Authorized Contract Administrator: Provide name, address and phone
- K.11 Prohibition on Contracting with Domestic Inverted Corporations
 - A Domestic Inverted Corporation (DIC) is a company that was previously incorporated in the United States or was a partnership in the US but has now incorporated in a foreign country, or that has now become a subsidiary whose parent corporation is now incorporated in a foreign country.
 - Check boxes appropriately to declare (K.11.c.1) if a domestic inverted corporation or not, and (K.11.c.2) if a subsidiary of a DIC or not

- K.12 Representation Regarding Certain Telecommunications and Video Surveillance Services or Equipment
 - "Covered telecommunications equipment or services" includes all Huawei and Huawei subsidiaries' products and services, including ZTE, Hikvision, Dahua, Hytera products
 - Check appropriate box in K.12.2.d.1 for will or will not provide any of the covered equipment or services in performance of this contract
 - Check appropriate box in K.12.2.d2 for <u>does</u> or <u>does</u> not use any of the covered equipment or services as a substantial or essential component of any system, or as critical technology as part of any system

- K.13 Tax on Certain Foreign Procurements
 - Foreign person means any person/company other than a United States person/company
 - K.13.d.1 Check box to identify as a foreign person or not
 - K.13.d.2 Check box if submitting IRS Form W-14 and claiming an exemption (information available at www.irs.gov/w14) or not
 - There is a 2% tax imposed on services from foreign companies in countries that do not have a tax treaty with the United States or are not part of the World Trade Agreement (DRC is not part of the WTO)
 - The tax is used to fund the World Trade Health Program
 - The tax may not be included in the contract price

- L.1-4 Instructions for proposals to include three separate volumes:
 - 1. Completed SF-33 Form (Section A of the solicitation/contract) and completed Section K, Representations and Certifications
 - 2. Price Proposal and completed Section B including Base Year and All Option Year Pricing, Riders, and Retention Amounts
 - 3. Technical Proposal including all technical factors and subfactors outlined in the Cover Letter, particularly addressing Section C Benefits and Section L, parts 1-4

- L.4.3 Instructions for technical proposal
 - Part 1: Provide coverage levels for Section C.1 Benefits
 - For each benefit listed, proposals must clearly state coverage, meeting or exceeding minimum required coverage level
 - Multiple proposals: If an offeror wants to propose multiple plans that meet or exceed minimum required coverage levels, separate proposals with respective prices are required for each plan
 - Recommendation: Submit a table that lists the Section C.1 benefit definitions in one column and list the proposed coverage in the adjoining column for easy comparison

- L.4.3 Instructions for technical proposal
 - Part 2: Demonstrate Understanding of the Requirement
 - Provide corporate literature, medical plan brochures, reports, surveys and other narrative descriptions of internal systems
 - Proposals must provide clear and adequate responses to the list of 13 specific questions/requirements (no. 12 is the definition of a provider network, not a question, but no. 13 requires the offeror to list all medical providers in the provider network, including at least seven of the ten providers listed in H.4.1.b.6)

- L.4.3 Instructions for technical proposal
 - Part 3: Experience and Past Performance
 - List all contracts and subcontracts held over the past three years for the same or similar work
 - Provide customer contact information, contract number/identifier, period of performance, where it was provided, type of insurance provided, range of population covered, dollar amount of contract
 - Briefly describe and compare to the work required under this solicitation
 - Briefly describe any performance problems and how they were resolved

- L.4.3 Instructions for technical proposal
 - Part 4: Licensing Information
 - Provide a notarized copy of the most current license/certificate/accreditation which demonstrates authorization to provide health insurance coverage in the DRC
 - Failure to demonstrate that the offeror is an authorized insurance company permitted to write and administer health insurance policies in the Democratic Republic of Congo shall be grounds for rejection of the proposal

Additional Requirements

- L.4.3.3 Profit Sharing Credit only applies if there is a profit sharing plan
- L.4.3.4 Employee Pool only applies if the offeror will pool Embassy employees and dependents together with other non-Embassy clients
- L.9 The CO may request a financial statement to determine the offeror's financial responsibility and ability to perform under the contract
- Offerors are strongly encouraged to provide a Financial Statement with the proposal

Section M, Evaluation Factors for Award

- Proposals must follow all instructions in the Cover Letter and Section L, Instructions, Conditions and Notices
- Proposals will be evaluated in two phases
 - 1. Technical Evaluation
 - 2. Price Evaluation

Section M, Evaluation Factors for Award

- Technical Evaluation
 - M.5 Details the evaluation process to determine technical acceptability
 - Meeting each of the individual mandatory requirements/minimums for health insurance coverage specified in Section C through H and submitting an acceptable management approach (Part 2 under L.4.3) indicating how vendor will administer the plan and demonstrate an understanding, knowledge and familiarity of the requirements.
- The Government may reject, as technically unacceptable, proposals that:
 - Fail to provide at least the minimum reimbursement levels for each benefit required by the solicitation; or
 - Fail to demonstrate how solicitation requirements will be met.

Section M, Evaluation Factors for Award

- Technical Evaluation also includes:
 - Demonstration that the offeror is licensed/certified/accredited
 - Acceptable relevant Experience and Past Performance
 - Offeror meets all other terms and conditions set forth in the solicitation
- Price evaluation includes base year plus all option years (excluding Riders)
- The Embassy will also make a responsibility evaluation, using responses to L.4.3 Part 3 Experience and Past Performance, L.4.3 Part 4 Licensing, and L.9 Financial Statement

Wrap-up and Questions

- Q&A and meeting minutes will be posted on beta.SAM.gov
- Direct any questions to the Contracting Officer at KinshasaBid@state.gov
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